Intermittent Self-Catheterization: Procedure for Women

Diet

A low-calcium diet helps a very small number of people who excrete calcium in their urine. Your doctor may recommend a lowcalcium diet if he or she feels that it will benefit you. If you need such a diet, check with a dietitian to help you choose foods.

Liquid

Drink at least 2 quarts of liquid daily. Drink cranberry juice, and limit your citrus juice intake to 4 to 6 ounces daily. Adequate liquid intake will help prevent urinary tract infection.

Catheterization

Unless you are told otherwise, try to urinate before catheterization. The number of times you will have to use the catheter depends on your liquid intake. Usually, you must catheterize yourself every 6 hours. Your doctor or nurse will change your schedule depending on the amount of urine passed and the amount obtained from catheterization.

Technique

When you are at home, use clean equipment and clean technique. Sterile equipment is used when you are in the hospital and is sometimes recommended for recurrent or chronic urinary tract infections. Practice catheterization with a nurse until you are able to perform the procedure by yourself.

Records

Record the amount of fluid you drink and the amount you urinate or obtain from catheterization. Check urine for a strong odor or particles of blood. Notify your doctor of such changes in your urine as quantity usually urinated, difficulties with catheterization, or signs of urinary tract infection (fever, chills, back pain, strongsmelling or cloudy urine). Your intake and output record will help the doctor and nurse evaluate your care needs. See the sample intake and output record in your booklet. Urine output should not be more than 1 liter (1 quart equals 1,000 cc) at a time. A lot of urine output may mean you need catheterization more often.

Medications

To prevent infections, your doctor may prescribe medications to lower the amount of bacteria in your urine.

Preparation

Gather your equipment

1. Straight catheter.

A new catheter is needed about once a month or when the one being used is brittle.

2. Soap and water.

Use only packaged soap pads for trips or when you are in a hurry.

- 3. Clean washcloth.
- 4. Water-soluble lubricant.

Do not use a petroleum-based lubricant such as Vaseline.

- 5. Pan for boiling equipment.
- 6. Plastic bag for used catheters.
- 7. Plastic bag for clean catheters.
- 8. Container into which to drain urine. Measure drainage if an output record is needed.
- 9. Mirror.

Procedure

- 1. Gather equipment and place it on a clean towel.
- 2. Urinate if you can.
- 3. Prepare your clothing.

Make sure your clothes are away from your body and that you have enough light to see well.

- 4. Wash your hands well. This reduces bacteria and prevents infection.
- 5. Lubricate the catheter's end for easier insertion.



- 6. Separate labia and wash them thoroughly with soap and water. This reduces bacteria and prevents infection.
- 7. Continue to keep labia separated.
- 8. Identify the meatus and insert the catheter about 3 inches (about 2 inches past where urine begins flowing). Place the end of the catheter into the toilet or measuring container. Use a mirror if needed. Assume a position that works best for you (sitting on the edge of a chair or the toilet, reclining, or standing in front of the toilet with one foot up on the toilet seat).



- 9. Hold the catheter in place until all urine is drained.
- 10. Bear down with abdominal muscles to enhance bladder drainage. Pressing or massaging the area over the bladder may enhance emptying.



- 11. Slowly remove the catheter.
- 12. Wash the catheter with soap and water. Place it in a plastic bag for used catheters.
- 13. Sterilize catheters by boiling them in water for 20 minutes. After they have cooled, place them in a clean, plastic bag. Use each catheter only once. Have four to sox catheters in use and sterilize them together daily.



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